Application Data Sheet

Application Information	
Application Type::	Divisional
Subject Matter::	Utility
Suggested Classification::	None
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	No
Title (line one)::	AN IMPRINT LITHOGRAPHY TEMPLATE
Title (line two)::	HAVING A MOLD TO COMPENSATE
Title (line three)::	FOR MATERIAL CHANGES OF AN
Title (line four)::	UNDERLYING LIQUID
Attorney Docket Number::	PA95/UTS-41-07D13
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	9
Total Drawing Sheets::	37
Small Entity?::	No
Petition Included?::	No
Secrecy Order in Parent Appl.?::	No
Inventor Information	
First Applicant Authority Type::	Inventor
Status::	Full Capacity
Given Name::	Sidlgata
Middle Name::	V.
Family Name::	Sreenivasan
City of Residence::	Austin
State or Province of Residence::	TX
Country of Residence::	USA

Austin

10502 Grand Oak Drive

Street mailing address::

City of mailing address::

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78750-3858

Second Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full

Given Name:: Byung-Jin

Middle Name::

Family Name:: Choi

City of Residence:: Round Rock

State or Province of Residence:: TX

Country of Residence:: USA

Street mailing address:: 1634 Jerusalem Drive

City of mailing address:: Round Rock

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78664-8620

Third Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Matthew

Middle Name:: E.

Family Name:: Colburn

City of Residence:: Hopewell Junction

State or Province of Residence:: NY

Country of Residence:: USA

Street mailing address:: 41 Farview Road

City of mailing address:: Hopewell Junction

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 12533-6821

Fourth Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Todd

Middle Name:: C.

Family Name:: Bailey

City of Residence:: Fishkill

State or Province of Residence:: NY

Country of Residence:: USA

Street mailing address:: 1315 Max Way

City of mailing address:: Fishkill

State or Province of mailing address:: NY

Postal or Zip Code of mailing address:: 12524-3935

Correspondence Information

Correspondence Customer Number:: None

Name Line One:: Kenneth C. Brooks

Name Line Two:: Molecular Imprints, Inc.

Name Line Three:: Legal Department

Address Line One:: P.O. BOX 81536

City:: Austin

State or Province:: TX

Postal or Zip Code:: 78708-1536

Telephone:: (512) 527-0104

Fax:: (512) 527-0107

Electronic Mail:: None

Representative Information:: None

Domestic Priority Information:: None

Foreign Priority Information:: None

Assignee Information

Assignee Name:: The Board of Regents, The University

Assignee Name (line two):: Of Texas System

Street of mailing address:: 201 W. 7th Street, 7th Floor

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78701